HINSHAW

Life, Health, Disability & ERISA

Protecting Insurers, Plans, and Fiduciaries Across the Country

Life, health, and disability benefit disputes demand a blend of technical knowledge, litigation skill, and industry understanding. Hinshaw's Life, Health, Disability & ERISA Litigation team represents leading insurers, benefit plans, administrators, fiduciaries, and managed care organizations nationwide.

We have handled thousands of cases in federal and state courts across the country, including nearly every U.S. Court of Appeals. Clients rely on us for practical, business-oriented counsel that reflects a deep understanding of how benefit plans operate, how courts interpret them, and how to achieve favorable results through negotiation, motion practice, or trial.

Depth and Experience: With a nationally recognized team dedicated to life, health, disability, and ERISA litigation, we bring unmatched experience across the full spectrum of benefit disputes. Our attorneys routinely serve as regional and national counsel to major insurers and plan administrators, managing complex litigation portfolios with consistency, efficiency, and precision.

National Reach, Local Insight: Our team practices in jurisdictions across the U.S., from California to Florida to the Midwest, and has argued before nearly every federal circuit and the U.S. Supreme Court. This breadth allows us to navigate jurisdictional nuances and provide seamless representation wherever our clients operate.

Industry Leadership: We help shape the future of the industry through leadership roles in organizations such as DRI, the ABA's Employee Benefits Committee, and the International Association of Defense Counsel.

Areas of Focus

Class Actions

Hinshaw's team is nationally recognized for defending complex and high-stakes class actions involving ERISA, life and disability insurance, and managed care litigation. We have successfully defeated class certification and achieved favorable settlements and dismissals in courts nationwide.

Our class action experience spans:

- Benefit determination and plan administration disputes under ERISA §§ 502(a)(1)(B) and 502(a)(3)
- Alleged fiduciary breaches in plan management and investment

- State law claims for bad faith, fraud, or consumer protection violations
- Claims arising from alleged improper claims-handling or coverage practices
  We combine procedural strategy with deep subject-matter knowledge to protect clients' reputations and manage the business impact of large-scale litigation

Learn More >

ERISA Benefit Litigation

We represent plan fiduciaries, administrators, and insurers in disputes governed by ERISA, including class actions and individual benefit claims involving life, health, disability, and pension plans. Our attorneys combine decades of courtroom experience with a deep understanding of ERISA's complex statutory scheme, allowing us to deliver strategic, efficient, and defensible solutions at every stage of litigation.

We advise and defend clients on issues such as:

- **Standard of Review Challenges:** Abuse of discretion, de novo review, and discretionary authority limitations
- **Preemption & Jurisdictional Defenses:** Complete and express preemption under ERISA §§ 502(a) and 514
- **Exhaustion & Procedural Requirements:** Internal appeals, notice compliance, and statute of limitations defenses
- **Fiduciary Duty & Equitable Relief:** Alleged breaches under §§ 409 and 502(a)(3), prohibited transactions, and plan mismanagement
- **Overpayment Recovery & Subrogation:** Offsets related to personal injury recoveries, workers' compensation, and SSDI benefits
- **Statutory Penalties:** Defending claims based on delayed or incomplete production of plan documents and records.

We also have significant experience defending ERISA class actions involving benefit plan mismanagement, fiduciary breach, and plan administration claims. Our team leverages deep familiarity with ERISA's procedural and jurisdictional defenses to minimize exposure and protect plan integrity.

Life & Disability Insurance Litigation

We represent insurers in disputes involving group and individual life, health, and disability policies. Our team routinely defends claims alleging wrongful denial or termination of benefits, policy rescission, agent misrepresentation, and breach of contract. We have a proven record of success at all stages of litigation, from early motion practice to trial and appeal.

Our experience includes:

- Claims involving total versus partial disability, accident versus sickness, and mental/nervous limitation disputes
- Accidental death and dismemberment claims, including contested coverage and exclusion determinations
- Allegations of fraud, churning, twisting, or misrepresentation by agents or producers
- Disputed policy lapse, waiver, estoppel, and notice-of-premium issues
- Long-term care, life insurance, and “vanishing premium” disputes
- Interpleaders and competing beneficiary claims

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Managed Care & Health Plan Litigation

Hinshaw attorneys have extensive experience representing managed care organizations, third-party administrators, and self-funded plans in disputes involving plan administration and reimbursement. We regularly handle matters involving contested medical necessity determinations, stop-loss coverage, recoupment claims, and alleged improper billing practices.

Our experience includes:

- Defending state and federal actions involving claims for bad faith, breach of contract, or ERISA violations.
- Advising on compliance with state insurance and health plan regulations
- Litigating disputes involving ASO (administrative services only) agreements and network participation contracts.
- Representing health plans in reimbursement and subrogation disputes against providers and plan members
- Handling complex billing fraud, overpayment recovery, and provider recoupment actions
  Our attorneys also regularly defend claims for equitable relief, statutory penalties, and consumer fraud tied to plan administration and coverage determinations

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Service Provider & Administrative Disputes

We represent insurers, benefit plans, and managed care organizations in disputes with service providers and vendors. These matters often involve allegations of overpayment, breach of ASO agreements, or failure to meet contractual or fiduciary obligations.

Our team’s experience includes:

- Defending claims by plan sponsors alleging breach of administrative agreements or improper claims processing

- Litigating disputes involving stop-loss insurers, preferred provider organizations (PPOs), and third-party administrators
- Addressing data integrity, reporting, and disclosure issues under ERISA § 104(b)(4) and related federal requirements
- Prosecuting reimbursement and recovery actions on behalf of plans and fiduciaries

Leadership & National Scope

For decades, insurers, plan administrators, and fiduciaries have turned to Hinshaw for leadership in life, health, disability, and ERISA litigation. Our national reach, courtroom experience, and deep understanding of benefit plan design allow us to handle the most sophisticated disputes with clarity, consistency, and confidence.

Insights

Press Release
Aug 25, 2025

Trial Spotlight: Hinshaw Prevails in ERISA Fiduciary Fraud Case

Event
Apr 10, 2025

Dan Ryan Presents on Recent Development in Health Insurance Law

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Related Capabilities

Alternative Dispute Resolution (ADR)

Bad Faith, Market Conduct & Extra-Contractual Liability

Complex Commercial Litigation

Consumer & Class Action Defense

Corporate & Transactions

Insurance

Labor & Employment

Litigation & Trial

Managed Care

Professional Services

Regulatory & Compliance